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SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
CRIMINAL DIVISION

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CRIMINAL DIVISION

UNITED STATES OF AMERICA

2013 FEB -8 P 1:37

FILED

v.

CASE NO.: 2010 CF1 020951

Judge Thomas Motley

Sentencing: 2/8/13

ROBERT CARTER

MEMORANDUM IN AID OF SENTENCING

Defendant, Robert Carter, by and through undersigned counsel, does hereby submit this Memorandum in Aid of Sentencing:

1. The Court, the parties, the victims and the community are well aware of the immensely tragic facts of this case. A child has been killed, family members have been injured and a family has been torn apart by this tragedy. Defendant fully appreciates the enormity of the facts of this case and is deeply remorseful for the lasting damage he will readily admit to having caused.
2. The issue has never been whether defendant committed the acts for which he was indicted and for which he entered pleas of guilty. The issue has been defendant's mental health and the impact that his mental health had on his actions.
3. Defendant retained Neil Blumberg, M.D. to perform a thorough psychiatric evaluation and summary related to defendant's mental health. A copy of the Dr. Blumberg's report was

previously provided to government counsel. A copy of Dr. Blumberg's report is attached hereto and incorporated by reference and made a part hereof.

4. Dr. Blumberg's report details defendant's psychiatric history and narcotics abuse history. Defendant first tried to commit suicide while a teen by ingesting Actifed, Excedrin and Dristan. Records reviewed by Dr. Blumberg from Providence Hospital in both 1996 and 2004 note that when defendant was admitted he was acting "acutely psychotic." He was treated with an anti-psychotic medication, Zyprexa. Since being held at the DC Jail, defendant has been treated with anti-psychotic medication such as Haldol and Cogentin. Dr. Blumberg notes that family members informed him that defendant was hospitalized at the Washington Center on one occasion and given a diagnosis of Schizophrenia or Bipolar Disorder.

5. Dr. Blumberg performed standardized testing on defendant and opined that he suffered from the following disorders: Schizophrenia, Paranoid Type; Cocaine Intoxication; Cocaine Dependence; and Personality Disorder not Otherwise Specified with Antisocial Features.

6. On December 14, 2011, defendant was evaluated at St. Elizabeth's Hospital. It was the opinion of the evaluator that defendant was experiencing psychotic symptoms at the time of the offenses herein but that the symptoms were due to voluntary use of marijuana, cocaine and opiates.

7. The government performed its own psychiatric evaluation on Mr. Robert. Their report concluded that defendant was impaired by a cocaine induced psychosis at the time of the commission of the offenses.

8. What is clear from every qualified expert who has evaluated defendant is that he suffers from profound mental illness. The illness is a combination of factors and is certainly exacerbated by voluntary substance abuse.

9. Defendant needs to have sustained mental health treatment during the long period of incarceration he is facing. In addition, he needs narcotics abuse counseling as well as life skills assistance so that he can control his behavior.

RECOMMENDATION FOR BUTNER, NORTH CAROLINA AS VENUE TO SERVE HIS SENTENCE

Undersigned counsel has spoken with a representative of the United States Bureau of Prisons to determine a location where defendant can receive mental health treatment. Counsel was informed that the Bureau of Prisons facility in Butner, North Carolina is equipped both to handle a prisoner of defendant's security status and to provide appropriate mental health counseling and medication. Butner is approximately 4.5 hours from the District of Columbia which will allow defendant to receive visits from his mother and aunt with whom he remains very close. Defendant maintains contact with his eldest son who will also be able to visit defendant if he were housed in Butner, North Carolina.

While punishment is clearly is an important factor in fashioning a sentence, so too is rehabilitation. Mr. Carter will be incarcerated for many years. Through a recommendation that he serve his sentence at Butner, N.C., both goals of punishment and rehabilitation can be achieved.

For the reasons set forth herein, defendant asks this Court to recommend to the Bureau of Prisons that he serve his sentence in Butner, North Carolina.

Respectfully submitted,

_____/s/_____
Steven R. Kiersh #323329
5335 Wisconsin Avenue, N.W.
Suite 440
Washington, D.C. 20015
(202) 347-0200

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and accurate copy of the foregoing was served, via electronic mail, upon David Gorman, Esquire and Erin Lyons, Esquire, Assistant U.S. Attorneys, on this the 5th day of February, 2013.

_____/s/_____
Steven R. Kiersh

Neil Blumberg, M.D., LLC
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August 17, 2012

Steven R. Kiersh, Esquire
Suite 440
5335 Wisconsin Avenue, N.W.
Washington, D.C. 20015

Re: Robert Carter

Dear Mr. Kiersh:

Pursuant to your request, I have completed my forensic psychiatric evaluation of Robert Carter, a forty-one year old man who is charged with First Degree Murder While Armed and related offenses in an incident that occurred on October 29, 2010 in Washington, D.C. The purpose of this evaluation was to determine whether, as a result of a mental disease or defect at the time of the offense, the defendant lacked substantial capacity to recognize the wrongfulness of his conduct or conform his conduct to the requirements of the law.

In order to address the above issue, I reviewed the following documents:

1. Report from Saint Elizabeth's Hospital, December 14, 2011;
2. Records from Children's Hospital National Medical Center;
3. Records from Prince George's Hospital Center;
4. Records from Providence Hospital;
5. Records from the Psychiatric Institute of Washington;
6. Complaint;
7. Gerstein Proffer;
8. Witness Statements and Police Reports concerning the current offense;
9. Public Defender Service Interview with Eric Gordon;
10. Records from the Central Detention Facility; and,
11. Records from the Psychiatric Institute of Washington of Dominique Key, the defendant's maternal cousin.

In addition to reviewing the previously noted materials, I examined Mr. Carter at the D.C. Jail on June 8, 2012 for three hours and on June 15, 2012 for two hours. As part of my evaluation, I administered the Personality Assessment Inventory (PAI) that was interpreted by Leslie Morey, Ph.D., the Millon Clinical Multiaxial Inventory-III (MCMI-III) that was interpreted by Theodore Millon, Ph.D., D.Sc. and the Miller Forensic Assessment of Symptoms Test (M-FAST) that I personally interpreted. I also interviewed Mr. Carter's mother, Stephanie Carter, and his maternal aunt, Karen Allen, on June 19, 2012 for one hour and ten minutes.

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At the onset of the evaluation, I advised Mr. Carter as to the nature and purpose of the evaluation, that we did not have a doctor-patient relationship, that I had been retained by his attorney, that the information we discussed would be shared with his attorney and might be brought out in Court and therefore the information discussed was not confidential. Mr. Carter understood this warning and consented to proceed with the evaluation.

FAMILY HISTORY:

Robert Carter was born on February 17, 1971 and was forty-one years old at the time of the evaluation. He was the only child of his parents' relationship. His mother, Stephanie Carter, is sixty, lives in Washington, D.C. and is retired from the Department of the Treasury. His father, Robert Carter, Jr., died in 1998 as a result of cirrhosis. Mr. Carter's parents were married but divorced when he was seven years old as a result of his father's substance abuse.

Mr. Carter is single but has seven children. Mr. Carter had five children with Moria Morris, who is thirty-nine, lives in Washington, D.C. and was wounded during the current offense. Christopher Morris is twenty-three, lives in Washington, D.C., attends school and is single with three children. Cerre Morris is twenty-one, lives in Washington, D.C., attends school, works and is single without children. Rachel Morris is seventeen, lives in Washington, D.C., attends school and is single without children. Candice Morris is sixteen, lives in Washington, D.C., attends school and is single without children. Angel Morris died in the shooting incident that took place on October 29, 2010. She was thirteen years old at the time of her death.

Mr. Carter has a son, Amani Wilkerson, who is seventeen. Mr. Carter has not seen Amani for some time but noted that his mother is Niki Wilkerson. Mr. Carter also has a son, Aaron Carter, who is twelve, lives in Maryland with his mother, Nicole Brooks, and attends school.

Mr. Carter and his family reported a family history of psychiatric illness in his paternal grandfather, his maternal cousin, Dominique Key (his records confirm a history of Psychotic Disorder, Substance Abuse and multiple psychiatric hospitalizations), a maternal second cousin (David Harris), who has been diagnosed with a Psychotic Disorder, his maternal great aunt and his daughter, Rachel, who has been diagnosed with Bipolar Disorder. There is also a family history of alcohol and drug abuse in the defendant's father and two paternal uncles and a history of incarceration in two paternal uncles. Mr. Carter's maternal aunt, Karen Allen, also reported that there is a family history of mental disorder in four of her second cousins.

PAST MEDICAL HISTORY:

Mr. Carter reported being diagnosed with chronic obstructive pulmonary disease (COPD) since the age of twenty-five, as a result of smoking. He currently uses an Advair inhaler. He was also diagnosed with hepatitis C several months ago for which he received injections. He was diagnosed with a sarcoma of his

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right thigh in 2001, which was treated while he was incarcerated. He noted that he wears glasses for nearsightedness and was treated for Chlamydia in his teenage years.

Mr. Carter noted that he fractured knuckles on his right hand in 1995 in a fight and that the fractures were treated by casting. He sustained a gunshot wound of his right thigh in 1995 and underwent surgery for a right femur fracture as a result of being injured in a motor vehicle accident shortly after the current offense on October 29, 2010.

Mr. Carter denied any history of episodes of loss of consciousness, fainting spells, seizures, neurological illnesses or infections, recurrent or persistent headaches, HIV infection or tuberculosis. In addition to using an Advair inhaler, he also noted that he is receiving Haldol, two pills at bedtime, and Cogentin, one pill at bedtime. He stated that he has only been receiving these medications since being transferred to the D.C. Jail and that he was not taking those medications at CTF because he did not report problems with auditory hallucinations at that time.

PAST LEGAL HISTORY:

Mr. Carter denied ever being charged with a criminal offense as a juvenile. At the age of eighteen, he pled guilty to Possession with Intent to Distribute Cocaine in Superior Court of the District of Columbia for which he underwent a sixty-day study and then received probation.

At the age of twenty-one, Mr. Carter pled guilty to Possession with Intent to Distribute Controlled and Dangerous Substances in Prince George's County, Maryland for which he received a ten-year sentence, all suspended but five years and five years' probation. He noted that he served two years, including six months in boot camp.

Mr. Carter reported that in 2001, his probation was violated as a result of having a dirty urine. He noted that he was then incarcerated for two years before being released in 2003.

Mr. Carter stated that in 2005, he pled guilty to Kidnapping and Sexual Assault of Nicole Brooks, the mother of his son, Aaron Carter, for which he served twenty-two months and received two years parole. The defendant stated, "I believed that she was in a prostitution ring and I kidnapped her and wanted to find out why she was being made to do these things. We had sex and then she ran out. I had picked her up from work. I was high on cocaine at the time."

PAST PSYCHIATRIC HISTORY:

Mr. Carter stated that he first received mental health treatment as a teenager on an outpatient basis. He noted that he was upset about his parents' separation, was lonely and depressed but that he only attended several sessions.

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Records from the Children's Hospital National Medical Center revealed that Mr. Carter was evaluated on March 22, 1982, at the age of eleven, as a result of having problems with reading, math and disinterest in school. The record indicated that he was the only child, who was the product of a full-term pregnancy and Caesarian section delivery. He underwent bilateral hernia repairs at the age of eighteen months and reportedly began experiencing emotional difficulties two years earlier when his parents divorced. He was noted to be of average cognitive ability with no learning disabilities. He had a normal physical exam and normal neurological and neurodevelopmental exams. He was diagnosed with anxiety and situational depression with concerns about his family situation.

Mr. Carter was seen again at Children's Hospital on February 9, 1989 when, at the age of seventeen, he took an overdose of Actifed, Excedrin and Dristan in order to hurt himself. His grandmother reported that Mr. Carter was upset about his poor school report.

Mr. Carter noted that he has had several hospitalizations at Seton House of Providence Hospital for dual-diagnosis treatment. He noted that one hospitalization occurred in his teenage years "when I was lurching on marijuana". He stated that he has had three or four hospitalizations as a result of getting paranoid and acting strangely while he was on drugs.

Records from his hospitalization at Providence Hospital from July 13, 2004 to July 15, 2004 indicated that this hospitalization was one of several admissions. Mr. Carter was thirty-three years old and displaying increasing disorganization and psychotic symptoms. He displayed bizarre behavior and was not making sense in the emergency room. The record indicated that his last Providence Hospital admission was in 1996, when he was acutely psychotic, using marijuana and was actively responding to internal stimuli. During that earlier hospitalization, he re-integrated quickly and was discharged. On the day following the current admission, the defendant denied experiencing any symptoms. The record indicated a positive urine toxicology for cocaine, opiates and cannabis. Mr. Carter was diagnosed with Polysubstance-Induced Psychotic Disorder and Polysubstance Abuse. He was treated with the antipsychotic medication Zyprexa Zydis, 10 mg., with an as-needed order for the antipsychotic medication Haldol, 5 mg. and the antianxiety medication Ativan, 2 mg. intramuscularly every four hours.

Mr. Carter noted that he was admitted to the Psychiatric Institute of Washington from February 17, 2010 to February 20, 2010. He reported being depressed and abusing cocaine and noted that Moria had urged him to go. The record from the Psychiatric Institute of Washington indicated diagnoses of Polysubstance Abuse and conjunctivitis and that the defendant left Against Medical Advice.

Records from the D.C. Department of Corrections indicated that Mr. Carter was initially placed in CTF, at which time he denied any acute psychiatric symptoms, as well as denying any past history of receiving mental health services. However, after being transferred to the D.C. Jail, he acknowledged experiencing auditory hallucinations for many years for which he had never sought help. On December 7, 2011, he complained of experiencing auditory hallucinations commanding him to kill himself. At that time, he was suspected to be malingering and given diagnoses of Cocaine-Induced Psychotic Disorder and Cocaine Dependence, despite the fact that he had been incarcerated and presumably not abusing cocaine for over a year.

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Mr. Carter's diagnosis was changed on March 9, 2012 to Psychotic Disorder Not Otherwise Specified. He reported ongoing auditory hallucinations and paranoia about the government being out to get him since he stopped selling drugs for them. He was treated with Haldol, twice a day, and Cogentin, 1 mg., twice a day.

A progress note on June 15, 2012 indicated diagnoses of Psychotic Disorder Not Otherwise Specified, Cannabis Abuse, PCP Abuse, Cocaine Dependence, Cocaine-Induced Psychotic Disorder with Hallucinations and Rule Out Malingering and Rule Out Factitious Disorder Not Otherwise Specified. Mr. Carter denied current psychotic symptoms and was being treated with Haldol, 10 mg. at bedtime and Cogentin, 2 mg. at bedtime.

Mr. Carter underwent a pretrial psychiatric evaluation at Saint Elizabeth's Hospital. In a report dated December 14, 2011, it was the opinion of the evaluator that Mr. Carter was experiencing psychotic symptoms at the time of the offense but that his psychotic symptoms were due to the voluntary use of marijuana, opiates and cocaine. The staff at Saint Elizabeth's Hospital administered the Structured Interview of Reported Symptoms-2 (SIRS-2) that was found to be in the indeterminate range (not confirming a diagnosis of Malingering).

When asked about his use of alcohol, Mr. Carter stated that he first tried drinking at the age of sixteen and he denied ever having a problem with alcohol. During the year prior to the current offense, he noted that he would consume alcohol approximately twice a month and that he would have one or two drinks if he were at a club. He acknowledged a prior history of alcohol-induced blackouts but denied any history of withdrawal tremors, withdrawal seizures or delirium tremens.

When asked about his use of illegal drugs, Mr. Carter stated that he first tried marijuana at the age of sixteen and that he used marijuana daily until 2001, when he began using cocaine. He noted that he then sporadically used marijuana, depending upon whether his urines were being tested as a result of being on parole or probation.

Mr. Carter stated that he used PCP on ten to fifteen occasions between 1999 and 2000, which resulted in his probation being violated in 2001.

Mr. Carter stated that he began using cocaine powder in the early 2000's and that cocaine powder has been his drug of choice since that time. He noted that his usage pattern is to go on binges of two to three days and then stop cocaine for one to two weeks before getting high again. During a binge, he will usually consume an eight-ball of cocaine over a two to three day period. He denied using crack cocaine or intravenous cocaine.

Mr. Carter stated that he tried Ecstasy in 2004 with Nicole Brooks, the mother of his son Aaron. He estimated that he used Ecstasy four times before discontinuing the drug because of a bad trip.

Mr. Carter denied any history of abusing LSD, heroin, amphetamines, pain pills, ketamine, inhalants or methamphetamine.

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PERSONAL HISTORY:

Mr. Carter noted that he was born and raised in Northwest Washington, D.C. He was the product of a full-term pregnancy and Caesarian section delivery. According to his mother, he reached his developmental milestones at the appropriate times and that he appeared to be a normal child who got along with everyone.

Mr. Carter denied any childhood history of bedwetting or firesetting. He noted that he did have a history of sleepwalking and that when he was seven he experienced auditory hallucinations commanding him to kill kittens, which he subsequently did. He also acknowledged having a childhood history of temper tantrums.

Mr. Carter described his mother as a sweet woman, who was strict but not abusive. He noted, however, that he was always closest with his maternal aunt, Karen Allen.

Mr. Carter stated that he loved his father but that his father was an alcoholic and that he did not see him often after his parents separated. He was well aware of his father's alcohol and drug problem and later acknowledged that his father bought drugs from him when the defendant was an adult.

Mr. Carter stated that he had a variety of friends and that he initially attended Sacred Heart Parochial School for first through seventh grade. He noted that he was expelled in the seventh grade for refusing to write with a pencil. He stated that he next attended Rabaut Middle School for seventh through ninth grade and then Roosevelt High School for tenth through twelfth grade. He reported that he graduated in 1989 and received average grades. He acknowledged not applying himself in high school because he was spending most of his time "on the streets". He noted, however, that in twelfth grade he wrote a paper on women preachers that was published in the *Washington Post*.

Mr. Carter stated that he began selling drugs when he was sixteen. He said that his girlfriend at that time, Moria, became pregnant with their first child and he needed money to support them. He initially worked as a lookout and later delivered drugs for other dealers before beginning to sell drugs for himself. He acknowledged that for many years his primary source of income was drug-dealing, although at times he held various other jobs in order to comply with probation.

Mr. Carter stated that after last being released from prison in 2007, "I was tired of selling drugs. Nobody was working for me." He noted that during the year prior to the current offense, he periodically sold cocaine to two or three clients but that he was financially struggling and "I was of no use to the government. I would have good years off and on and then I'd get locked up and then I'd start again. I had always been able to take care of my kids."

Mr. Carter stated that an older male neighbor sexually molested him when he was nine years old, at which time he was coerced into allowing the neighbor to perform oral sex on him. He said that he is still bothered by thoughts of this incident. He also acknowledged that an older female cousin made him and another cousin engage in sexual activity when he was eleven or twelve.

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Mr. Carter stated that he became involved with Moria Morris when he was fourteen and she was twelve. "She was very pretty and sweet. We had five kids together. We broke up after our first child and then during her second pregnancy but then we were together after the second child. I tried to be a family. Moria would leave and then I felt like I was an ATM machine with my hustling and not being there. We broke up when I was with Nicole for about ten years."

Mr. Carter stated that when he was last released from prison in 2007, he and Moria became involved again and lived together at [REDACTED] Madison Street, N.W. through the time of the current offense. The defendant stated that he remained close with all of his children.

According to Mr. Carter's mother and aunt, the defendant moved out of the family home when he was eighteen. They were not aware of any prior alcohol or drug problem. They stated that the defendant appeared to be experiencing mental health problems around the age of nineteen, when "he was talking out of his head, out of control, making weird noises and he couldn't move his legs. We took him to Providence Hospital and Seton House. Nobody said if his problems were psychiatric or due to drugs."

The family indicated that on one occasion, when Mr. Carter was in his early twenties, he drove off a cliff in Prince George's County because he believed demons were after him. They noted that he had marijuana in his system but no other drugs.

The family also indicated that on one occasion he was hospitalized at the Washington Hospital Center and given a diagnosis of Schizophrenia or Bipolar Disorder. The defendant was in his late twenties at that time and had kicked a door in, which led to Moria taking him to the hospital. They indicated that there were no drugs in his system at that time.

On another occasion, when Mr. Carter was in his twenties, the defendant was living in a high-rise and was going to commit suicide by jumping off the balcony. The family believed that he might have been taken to Prince George's Hospital Center. They noted that he had been admitted to Prince George's Hospital Center on several occasions.

The family indicated that Mr. Carter was frequently in denial of any psychiatric problems. They stated that Moria often said that there was something wrong with him.

The family indicated that they saw the defendant two days prior to the current offense with his daughters, Angel and Candice. "He didn't seem too right. He was usually bubbly but he looked subdued. He didn't look kosher. I (Karen Allen) recommended that he get checked out. He looked worn out, like his mind wasn't there. He wasn't normal but he didn't look high. He looked like my son (Dominique Key). He and the kids were there for less than a half an hour."

The family noted that Mr. Carter was never violent to his children and that he was particularly close with his daughter Angel. They also noted that at times the defendant felt that people were out to get him and that on many occasions he would go to the basement, where he would stay for days at a time. They stated that they were not aware that the defendant had a gun. They noted that Mr. Carter never had much money

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and therefore could not have been a big-time dealer. They were aware that he was using cocaine but uncertain as to how much or how often he used cocaine.

The family noted that the defendant and Moria had a chaotic relationship, although they always returned to live with each other. They noted that the defendant and Moria lived in Section 8 housing and that the defendant's mother periodically gave them money to live.

The family noted that during the year prior to the current offense, Mr. Carter often talked about hearing voices and feeling that something was not right. He spoke of his former girlfriend, Nicole, being in a prostitution ring and also made comments about Moria also messing around or being in a prostitution ring. They noted that the defendant often talked about conspiracies, of people being out to get him, including strangers that he would see on the street. They noted that the defendant would often stare and looked like he believed that people were out to get him.

The family reported that during the four months prior to the current offense, Mr. Carter seemed paranoid and that he often questioned Karen Allen about what she was doing. Ms. Allen noted that she was scared of him as a result of his staring and looking around. Ms. Allen also noted that the defendant told her about hearing voices beginning when he was in his thirties. She stated that she always recommended that he see someone, although the defendant ignored her suggestion, at which point, she ignored his repeated statements about hearing voices.

DEFENDANT'S STATEMENT ABOUT CURRENT OFFENSE:

Mr. Carter stated that he was released from prison around Thanksgiving, 2007 and that he eventually obtained a room on Oliver Street in Hyattsville, Maryland for parole purposes while actually living with Moria Morris at [REDACTED] Madison Street, N.W. He noted that all of his children, except for Christopher, lived at that address. He said that his mother, other family members and friends helped support him but after several months he got tired of asking people for money, at which point he started to sell crack cocaine again. Once he began selling crack, he also began periodic binges with cocaine powder.

Mr. Carter noted that Moria was working and going to school and was worn out by her schedule. He suggested that she just attend school and that he would take care of the bills. Mr. Carter denied seeing other women after being released from prison, although he noted that he eventually saw Moria having lunch with another man and believed that she was cheating on him.

The defendant stated, "Moria was a drama queen. We'd argue and fuss. She would cheat on me off and on and I would leave but then I wanted to be around the kids and I didn't want to leave. I loved being around the kids."

The defendant further stated, "Our relationship was okay as long as I had money. Moria used to cuss me out. She'd call me a crackhead. She disrespected me. She was upset I was getting high and seemed angry a lot but she was using me for my money."

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The defendant stated that by 2009, "I was tired of selling drugs. I wanted to stop. We were struggling for money and I borrowed it from my mother and grandmother. We were living in Section 8 housing so the rent wasn't bad." He stated that he dramatically reduced the amount of cocaine that he was selling so that he had enough to pay basic bills and support his own habit.

During the months prior to the current offense, Mr. Carter stated that he had caught Moria cheating and that, although he was still living with her and the children, he also began seeing other women. He stated that he suspected that she was having an affair with her boss and that when he confronted him, her boss apologized. He acknowledged, however, that he and Moria continued to have tensions between them.

Mr. Carter stated that he did not use cocaine for several days prior to the current offense. He noted that on the day of the current offense, "I felt fine. I got up around 7:00 or 8:00 a.m. and smoked a cigarette. I drove Moria to school at UDC around 9:00. We went to the Seven-Eleven and she asked me for money for coffee. I refused because she never finished her coffee. Then she threatened to call the police because the police would always come and lock me up and beat me and they'd never listen to me. This proved to me that she was involved in a prostitution ring and was working for the government."

"I gave her money for the coffee and then took her to school. Two months earlier she had called the police and had gotten me beaten up badly. I returned home around 10:00 and started to get high. I kept sniffing until Angel came home around noon."

The defendant stated that Moria's other children, Shaheed, who was twelve, and Michael, who was seven, had also come home from school and that he sent the three of them to the store "for goodies". He noted that the children returned twenty minutes later, around which time his friend, Eric, called and wanted to buy crack cocaine. Mr. Carter agreed and Eric told him that he just gotten a haircut. Mr. Carter stated that he asked Eric if he could take the boys for haircuts, and Eric arrived at the house around 1:00 p.m. and took the boys for haircuts.

The defendant stated, "I was still getting high but then everything went haywire. I got the gun and went downstairs. Angel was watching TV. I grabbed her and took her to the basement. While I was walking with her, it was like I was outside my body, watching myself. There was something evil in the house. Moria said I was like the gatekeeper. I saw myself hold the gun to Angel's head. The next thing I knew, the gun went off. I was watching myself shoot her in the head."

The defendant was uncertain what he was thinking or whether he was experiencing any hallucinations at that time. He acknowledged shooting Angel once in the head, after which he walked to the main level of the house. "I called Eric and my cousin and told them that I shot Angel by accident. Eric said he'd call an ambulance and I told them she was dead. Then the boys and Eric returned. I made them sit on the couch. Eric said he left the keys in the car and I got the keys and came back in. I remember hearing voices while I was getting high that Moria was going to call the police, that the police were the number one enemy and that the police were going to kill me and I better get them first."

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"I told my sons to sit down. I gave Eric drugs to chill. Then Rachel knocked and I opened the door and told her to sit on the couch. Several months before I caught Rachel leaving the house early and she hit me in the head with a pressure cooker and the police beat me up. The voices said she'd bust me in the head so I better get her, too, meaning that I ought to kill her also. I had been close with Rachel. I thought of being close when she was little, so I didn't do it. I called Cerre and told her to call Moria for an emergency (before Rachel had gotten there). Then I told Rachel I shot Angel."

"I started arguing with the voices about hurting Rachel and I refused to hurt her. Then there was a knock on the door and it was Moria. I grabbed Moria and pulled her in. I remember Chris shaking me and calling 'Dad'. I had the gun pointed and Moria was holding her stomach. I don't recall shooting her. Moria went to the porch. I went to the porch and tried to get in Eric's car. Chris tried to stop me and we got in a fight and I left."

"I had to get away. The voices were saying to switch cars. I saw a Metro Access car and the voices said take it. I opened the car door and told the man to get out. There was an old lady in the car. I took her to Tiller Street and told her that I stole a car and to get out and I asked her to pray for me. I drove to Indian Head Highway, where I bought some coke. I planned to go to the police station to shoot up the cops who beat me up. I was debating with the voices. They said, 'They're going to kill you. You might as well do that.' I drove back to D.C. Aunt Karen called me at the house. There were lots of people calling me on my cell-phone to turn myself in. The police were at every exit. The police began chasing me and hit the car and I crashed."

The defendant stated that he had a .45 for several months prior to the current offense. He stated, "I had it after Moria threatened to have gangbangers kill me and our son Chris". The defendant noted that he was taken to Prince George's Hospital Center for several days after breaking his leg in the car crash. While at the hospital, he recalled still hearing voices, some of which told him to snatch a police officer's gun. He was subsequently taken to the Prince George's County Detention Center for several days, where he denied receiving a psychiatric evaluation. He noted that he was then taken to CTF, where he also denied undergoing a psychiatric evaluation.

MENTAL STATUS EXAMINATION:

Robert Carter was a forty-one year old, African-American man, who wore glasses and had a beard and mustache. He looked his stated height of five feet, eight inches and weight of 217 pounds. His ears were pierced and he reported having a tattoo of Nicole with a burning heart.

Mr. Carter was cooperative in responding to all questions asked of him. He did not display any abnormal behaviors, tics or mannerisms. His speech was coherent, relevant and goal-directed, showing an adequate comprehension of questions. There were no abnormalities to the rate, rhythm or volume of his speech.

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Mr. Carter appeared to be depressed and tearful at times throughout the interviews. He stated that his sleep was adequate at the present time, although earlier in his Detention Center stay, he was kept up by voices arguing and cursing at him. He denied any current disturbance in his appetite or impairment in his energy level.

Mr. Carter stated that he has been prescribed Haldol for several months but acknowledged not regularly taking the medication "because I'm scared the government is going to kill me. I think Moria may be part of the government prostitution ring with the medication and that the police are working for her. I thought Moria was going to kill me. She took life insurance out on me. We were always arguing and I thought I might be being set up."

At times during the interviews, Mr. Carter appeared to be confused and his thoughts were not particularly goal-directed. During these times he rambled about various persecutory delusional themes. His thinking was more organized when asked closed-ended questions.

When asked about psychotic symptoms, Mr. Carter reported that he first heard voices at the age of seven that told him to put kittens in the trash and beat them in the head, which he subsequently did. He noted that at that time he recalled hearing multiple voices that then occurred off and on. He stated that the voices would sometimes argue but that they did not tell him to do destructive things again until his teenage years. He noted that prior to his teens, despite hearing voices, he was not under the influence of alcohol or drugs.

Mr. Carter stated that around the age of fifteen or sixteen, the voices began telling him to kill himself. He stated that he heard these voices when he was not high and that they occurred usually when he was depressed, doing poorly in school and upset about not seeing his father. He noted that he experienced multiple voices that came from outside his head and that the voices occurred intermittently. He reported that he did not recognize the voices as being real people.

Mr. Carter stated that since his teenage years, he has heard voices off and on, although he has generally learned not to pay attention to the voices. He stated, "They say different things. During the interview at Saint Elizabeth's, they were saying, 'Fuck that bitch'." The defendant stated that the voices at times argue among themselves and at times keep him up at night. He noted that he hears the voices more often if he is not doing anything and it is quiet.

Mr. Carter stated that the voices have told him to kill himself and also to hurt others. "I try to block the voices out. I use the radio or the TV. I get busy and that blocks it out." He noted, however, that the voices often get louder and more intense if he does not follow their direction.

Mr. Carter stated that he has heard voices regardless of whether he is using drugs or not. He noted that he continues to hear voices while in the D.C. Jail. He recalled that at times the voices have told him, "Get him before he gets you". He stated, "They'll hype me up to do something. They say, 'He must think you soft, a bitch.' They'll agitate me to do something. Getting high will calm me down."

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Mr. Carter also stated that he has experienced the visual hallucination of watching Moria prostituting. "She denies it, it's her, but I'm seeing it. Then the voices will comment on it. One night when I was at CTF, I saw Moria having sex on the roof. I knew it wasn't real."

The defendant also stated that at times if he was in a car by himself, people would start talking about him on the radio. He has also experienced people on TV debating about him. "It happens regardless of drugs."

The defendant also stated, "I think the government is out to get me. I used to be a big dealer. The government put drugs in the neighborhood and it was my job to sell them. Then the government stopped me from going into the ROTC and the military, so that I would continue to sell drugs and I became a dealer."

Mr. Carter also believed that Moria and her sister were involved in a prostitution ring that was run by the government. "The government gave her her house and money and the police are her enforcers. I think that some street guys were also working with her. There was a guy from her neighborhood talking about violence and I thought they were talking about hurting me and my son."

The defendant also stated that once when he was about to have sex with Moria, "A spirit began having sex with her. It was an evil spirit. Then she left. I saw lots of evil things in the basement. Several nights before the incident, there was a thunderstorm. The kids were there and the lights went off. I went in the basement to check the fuse and I think I provoked the spirits to be mad. In the past, there was a force dragging me into the basement."

Mr. Carter reported being right-handed and right-footed. Intellectually, he impressed this examiner as functioning within the average range. He was alert and oriented to time, person, place and situation. He did not demonstrate any significant impairment in his immediate recall, short-term memory or long-term memory. The defendant denied any current suicidal or homicidal ideation.

PSYCHOLOGICAL TESTING:

Mr. Carter had valid profiles on both the PAI and the MCMI-III. The validity indicators suggested a tendency to magnify illness that was consistent with feelings of extreme vulnerability associated with a current episode of acute turmoil. Such a validity presentation is also indicative of "a cry for help". Given the question of exaggeration, I administered the M-FAST, which was well below the threshold for malingering.

The MCMI-III profile suggested a diagnosis of Schizophrenia with a personality configuration composed of schizotypal, depressive, dependent and self-defeating personality features.

The PAI suggested primary diagnoses of substance dependence, depression and Schizoaffective Disorder and Paranoid Schizophrenia with paranoid, borderline and antisocial personality disorder features.

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ASSESSMENT:

Robert Carter is a forty-one year old man, who is charged in Superior Court of the District of Columbia with the murder of his thirteen year old daughter, Angel, the wounding of Angel's mother and related offenses.

Mr. Carter comes from a family in which there is an extensive history of mental illness, alcoholism and substance abuse. He reported first experiencing auditory hallucinations at the age of seven, at which time voices told him to kill kittens, which he subsequently did. He acknowledged continuing to experience intermittent auditory hallucinations from that time forward. He acknowledged becoming depressed after the separation of his parents and the much more infrequent contact with his father, which also occurred when he was approximately seven years old.

Although Mr. Carter did adequately in school and graduated from high school, he became involved in selling drugs in his teenage years, which he continued throughout his adulthood. Mr. Carter also began abusing drugs around the age of sixteen and noted that by the early 2000's his drug of choice was cocaine powder, which he used in binges. The defendant noted, however, that he continued to experience intermittent auditory hallucinations regardless of whether or not he was under the influence of drugs. He has had a number of prior hospitalizations in which he was noted to be psychotic while under the influence of drugs, suggesting a diagnosis of Substance-Induced Psychotic Disorder.

Mr. Carter was last released from prison in 2007. Over the years prior to the current offense, he intermittently binged on cocaine powder and continued to experience intermittent auditory hallucinations, along with persistent persecutory delusions that often involved the belief that Moria and others were involved in a prostitution ring that was organized by the government in order to force him to continue selling drugs.

As a result of my forensic psychiatric evaluation, it is my opinion, to a reasonable degree of medical certainty, that on October 29, 2010, Robert Carter was suffering from the following mental disorders:

1. Schizophrenia, Paranoid Type (DSM-IV-TR: 295.30);
2. Cocaine Intoxication (DSM-IV-TR: 292.89);
3. Cocaine Dependence (DSM-IV-TR: 304.20); and,
4. Personality Disorder Not Otherwise Specified with Antisocial Features (DSM-IV-TR: 301.9).

It is my further opinion, to a reasonable degree of medical certainty, that, as a result of the above-noted mental diseases at the time of the offense, Robert Carter lacked substantial capacity to recognize the wrongfulness of his conduct and conform his conduct to the requirements of the law.

The information provided by Mr. Carter, his family and the accompanying mental health records, along with my clinical examination and the results of psychological testing, support a diagnosis of Schizophrenia, Paranoid Type. Mr. Carter has an extensive family history of mental illness that likely placed him at increased risk for developing Schizophrenia. His description of his auditory hallucinations,

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his reported delusional beliefs and the more subtle signs of a thought disorder, as indicated by his periodic confused thinking, are consistent with this diagnosis. The fact that he continues to experience intermittent auditory hallucinations and persecutory delusions while incarcerated and presumably not under the influence of cocaine supports the diagnosis of Schizophrenia, Paranoid Type and is inconsistent with a diagnosis of Substance-Induced Psychotic Disorder. Current psychological testing, despite his reporting many unusual symptoms, is not indicative of malingering.

Mr. Carter acknowledged using cocaine powder on the day of the current offense. It is my opinion, to a reasonable degree of medical certainty, that his use of cocaine likely exacerbated his underlying Paranoid Schizophrenia, resulting in a more agitated, paranoid, psychotic state that ultimately resulted in his killing his daughter and wounding of others.

My opinion that Robert Carter lacked substantial capacity to recognize the wrongfulness of his conduct and conform his conduct to the requirements of the law is based on the following factors:

1. The defendant lacked a rational motivation for engaging in the offense conduct, which strongly implicates his psychotic condition as being a primary factor in impairing his ability to appreciate and conform;
2. There is clear evidence that the defendant suffered from a psychotic illness prior to, at the time of and following the current offense that is separate and apart from a mere substance-induced condition;
3. Other witnesses confirm the defendant's history of bizarre and psychotic thinking; and,
4. The clinical examination and results of psychological testing are not indicative of malingering.

Respectfully submitted,

Neil Blumberg, M.D.

Neil Blumberg, M.D., D.F.A.P.A.

NB:esp